*Men's A/AA - Monday Nights

*Women's B/BB - Tuesday Nights

*Women's A/AA - Thursday Nights

*If more than 9 teams are in a division each team may have to play matches on Wednesday evenings and/or other available time slots.

LOWER PAXTON PARKS & RECREATION

5000Commons Drive, Harrisburg, PA 17112 Phone 657-5635	Check #	_CC Cash	
	Men / Women	AA A BB B	
2007/2008 Winter League	Number	of	_
YBALL LEAGUE ROSTER & TEAM ENTRY APPLICATION			

Date:

R or NR

VOLLE

PLEASE CIRCLE ONE: Men AA, Men A, Women AA, Women A, Women BB, Women B FEE: \$515.00 Resident \$555.00 Non-Resident

Return this form with payment to the Recreation Office September 4-14, 2007 between the hours of 8 a.m. - 5 p.m.

TEAM NAME: SPOI		SPONSOR:	SPONSOR:				R or NR	
Name (Print/Type)	Address (Street, City, & Zip)	LP Res	USAV REG ?	Telephone (D-Day/E-Evening)	Jersey No.	Shirt Size	Date Added	
Captain								
	C f 1 didi 1 d	1 '1 1 1	• 1					

Space for additional team players available on reverse side.

I hereby certify that the above information is co	orrect and that I have read & agree to all the rules & regulations of the Vol	lleyball League.
Manager	Managers Signature	*EMAIL ADDRESS:

^{**}All Players listed must have complete address, jersey & telephone numbers, (X) if Lower Paxton resident & last year of USVA registration, if applicable. Minimum ten (10) players on roster, no maximum.

Name (Print/Type)	Address (Street, City, & Zip)	LP Res	USAV REG ?	Telephone (D-Day/E-Evening)	Jersey No.	Shirt Size	Date Added